Return of Organization Exempt From Income Tax

OMB No 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

Department of the Treasury Internal Revenue Service

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

A	For the	2016 cale	endar year, or tax year begin	ning	January	, 2016,	and endin	9	<u>ece</u> m	ber	, 20 16	
В	Check if a	applicable	C Name of organization Interna	tional Uni	ion UAW Local 5242	40-	018216	1.	D	Employ	er identification nu	ımber
	Address of		Doing business as Local Ur				, <u>u</u>				90-182166)
П	Name cha	•	Number and street (or P O bo			ress)	Room/sui	te	E	E Telephone number		
$\overline{\square}$	Initial retu	-	425 Jefferson Ave.					542	l		419.720.3940	
\Box		n/terminated	0.1	country, an	id ZIP or foreign postal o	ode			1			
\Box	Amended		Toledo, Ohio 43604	•	•				٦	Gross re	eceipts \$	395,444
H		on pending		officer F	mılio Ramirez			H(a) Is th	_		subordinates? Yes	
	Application	on pending	425 Jefferson Ave., Toledo					1	a) Are all subordinates included? Yes No			
	Tax-exem	ont otatue	☐ 501(c)(3)) ◄ (insert no) ☐ 494	7(a)(1) or	527				list (see instructio	
<u> </u>	Website:			1(0) (3) 4 (III3611110) L.3 494	/(a)(1) 01	<u> </u>					427
ĸ		rganization		sociation	Other ▶	L Ye	ar of format		-		of legal domicile	ОН
P	art i	Summ										
	_		escribe the organization's	mission o	r most significant a	ctivities	Promot	te social	and ed	onomi	c justice throug	h
ø	1	-	bargaining, education, con		•		1				-	
auc			ts, delivery of benefits to me									
Ē	2	Check th	nis box ▶☐ if the organiza	tion disco	ntinued its operation	ons out d	1800s2001	more t	han 2	5% of	its net assets.	
Governance	3	Number	of voting members of the	noverning	body (Part VI_line	1a)	0-1-2		_	3		12
a O	1		of independent voting mer				la luna III de	titv		4		11
es	1		mber of individuals employ					rich.		5		-0-
Σį	1		mber of volunteers (estimate		•		·, .		·	6		12
013 Activities	1		related business revenue fr			12			•	7a		-0-
1			lated business taxable inco						•	7b	_	-0-
—		ivet dine	iatea basiness taxable into	31110 110111	1, 111100		RECE	IV Pro	Year	1	Current Ye	
•	8	Contribu	itions and grants (Part VIII,	line 1h)					JQ S	-0-		-0-
, a			service revenue (Part VIII,	· · · · · · · · · · · · · · · · · · ·			JUN \$	2 2017		9,506		395,264
Revenue	1	_	ent income (Part VIII, colum			B07	0.211	L LUII	8	128		180
٣,			venue (Part VIII, column (A)		•	1116			≌	-0-		-0-
j	1		enue-add lines 8 through				QG_iQ_i	N, U l		9,634		395,444
;—			nd similar amounts paid (P				110 12/-			-0-		-0-
;	1		paid to or for members (Pa							-0-		-0-
S	1		other compensation, emplo			A). lines	5-10)			54,362		123,620
Expenses	1		onal fundraising fees (Part				· · · · · ·	-0-				-0-
per	ľ		draising expenses (Part IX			•		Ant Distriction	attam value		Aller Carrier	
Ñ	1		penses (Part IX, column (A					> manager	2:	30,159	n/ 1 3 8090 1 1000	196,479
	T .		penses. Add lines 13–17 (m		•). line 2	5)			34,521		320,099
	1		less expenses. Subtract li		•		-	***		5,113		75,345
59					<u> </u>			Beginning o			End of Ye	
rung bajances	20	Total ass	sets (Part X, line 16)				[31	10,395		385,740
ğ	21	Total liab	oilities (Part X, line 26)							-0-		-0-
Ž	22 1	Net asse	ts or fund balances. Subtra	act line 21	from line 20 .		🗀		31	0,395		385,740
2	art II	Signat	ture Block									
'n	der penalt	ies of perju	ury, I declare that I have examined	this return,	including accompanying	schedule	s and staten	nents, and	to the l	est of n	ny knowledge and	belief, it is
'u	e, correct,	and compl	lete Declaration of preparer (other	than officer) is based on all informa	ion of wh	ich preparer	has any kr	owledg	e		
	}	\searrow	Bridget He	ndl	1212				6	5-1	9-17	
	an		lature of office		0 - 4				Date	·	_	
е	re		idget Henderson, Fir	nanciai	Secretary			O	6/19/	2017		
_		', _ : : 	or print name and title									
а	id	Print/Ty	pe preparer's name	Prepa	rer's signature		Dat	te		Check [T if PTIN	
r	eparer	•								self-emp	→	
	e Only		name 🕨						Firm's E	IN ►		
		Firm's a	iddress ▶						Phone i	no		
_			s this return with the prepa			uctions)	<u> </u>	<u>· · ·</u>	<u> </u>	<u> </u>	🗌 Yes	No
	Pananu	ARK DAGU	Otion Act Motion con the co-	aarata imad	hui sadi awa							ΛΛ

Part	IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1		✓
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	ļ	1
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		***************
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		✓
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		√
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		✓
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		~
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			_
	Schedule D, Parts XI and XII	12a		✓
13	"Yes." and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		√
14 a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13		√
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	14a		✓
~	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.			,
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	14b		<u>√</u>
16	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		✓
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		✓
	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		✓
	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		✓
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		✓

Part IV Checklist of Required Schedules (continued)

	Y		Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		√
b 21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20b		
22	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	21		✓
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		✓
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		✓
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		√
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		✓
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		√
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):	•		
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√ √
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<u>▼</u> ✓
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<u>-</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u>·</u> ✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		<u>·</u> ✓
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u>√</u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	33		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	√	
		Form	990	(2016)

Part	Check if Schedule O contains a response or note to any line in this Part V			Г
	Check if Scriedule O cortiains a response of note to any line in this Part V	• •	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a	2003. V	***	wy iż
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			931
C	Did the organization comply with backup withholding rules for reportable payments to vendors and		5	
·	reportable gaming (gambling) winnings to prize winners?	1c	J.	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		W	\$1: L
Za		onder -		
L		2b	. 990	9884 - 1
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	20		
20	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	3a	\$ 12 9 00	1
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3b		▼
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	30		\vdash
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		1
L	·	4a	Ols Com	1
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	*****		
50	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
5a k	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
b	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		┞
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	130	-	\vdash
Va	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	Ua		╀
b	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	OD	N 45 1990	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	400 1900	6. 1884 1885	
-	and services provided to the payor?	7a	en (200	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		├
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	"		-
•	required to file Form 8282?	7c		i
d	If "Yes," indicate the number of Forms 8282 filed during the year	4/30/85, 1		W.
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	Hadaman	Store Vi
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7f		
a	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>
ĥ	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	Marie Marie	E	
	sponsoring organization have excess business holdings at any time during the year?	8	and the sa	
9	Sponsoring organizations maintaining donor advised funds.		· 325 .	200
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:		en est	786
а	Initiation fees and capital contributions included on Part VIII, line 12			30 / 10 / 10 / 10 / 10 / 10 / 10 / 10 /
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	Syria Mary		- 3
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders		. 59%	
b	Gross income from other sources (Do not net amounts due or paid to other sources			5 3
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	dilata neleke	X
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			780°
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	_ 71.	- W. /
	Note. See the instructions for additional information the organization must report on Schedule O	***		
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans	. 4		
	Enter the amount of reserves on hand			45. "X
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14h		

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.	See inst	ructi	ons.
Secti	Check if Schedule O contains a response or note to any line in this Part VI	· · · ·		<u> </u>
	on a coording Dody and management	T	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	2		
b 2	Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		\
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		√
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	5 6	✓	✓
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	✓	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a b 9	The governing body?	8a 8b	√	
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	9 Due Co	de)	<u> </u>
	on Dr. Gueros (Timo econori B requesto information about pondico net required by the internal rievel		Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a	√	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	10b	✓	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	allate is side.		V Laij
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b	√	ka 'xXXXXXI
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	√	
13 14 15	Did the organization have a written whistleblower policy?	13 14	✓	✓
a b 16a	The organization's CEO, Executive Director, or top management official			✓
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16a 16b		
Secti	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed ▶ Ohio Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply. ☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)	n 501(c)(3)s	only)
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of in financial statements available to the public during the tax year.			, and
20	State the name, address, and telephone number of the person who possesses the organization's books and re	ecords: I	•	

D	•
Paue	

	·/			
Part VII	Compensation of Officers, Directors,	Trustees, Key Employees,	Highest Compensated	l Employees, and
	Independent Contractors			

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☐ Check this box if neither the organization no	r any relate	d org	aniz	atic	on c	ompe	ensa	ted any currer	nt officer, directo	r, or trustee.
		Ī			<u>C)</u>			1		
(A)	(B)	(B) Position						(D)	(E)	(F)
Name and Title	Average					e than		Reportable	Reportable	Estimated
Name and Title	hours per					is bot or/trus		compensation	compensation from	amount of
	week (list any	-					T.	from the	related	other compensation
	hours for related	Individual trustee or director	Institutional trustee	Officer	Key employee	함함	Former	organization	organizations (W-2/1099-MISC)	from the
	organizations	dua	it or	*	曹	yee	4	(W-2/1099-MISC)	,	organization
	below dotted	ਁ ਵੋ	<u>a</u>		oye	1 3]	1	and related organizations
	11116)	stee	rust		0	ens	1			Organizations
			ee '			Highest compensated employee				
(1) Brad Aemisegger					ĺ					
Trustee	4	✓		V			↓_			
(2) Karen Berman		,	ļ.		ŀ	ļ	1			
Trustee	4	✓	<u> </u>	✓	<u> </u>	ļ	↓_			
(3) Michael Cowan	ļ 			١,						
Trustee	4	✓		✓	<u> </u>	<u> </u>	-			· · · · · · · · · · · · · · · · · · ·
(4) Tracy Knighten							İ			
Trustee	4	✓	_	✓						<u> </u>
(5) John Krajeskı							1	İ		
Trustee	4	✓		✓	<u>_</u>		L.			
(6) Trent Leedy						ļ				
Trustee	4	✓	_	✓	ļ				`	
(7) Scott TenEyck										
Trustee	4	/		✓		L .				
(8) Willie Ward										
Trustee	4	✓		✓						
(9) Amy Hartman								-		
Trustee	4	✓		√			<u> </u>			
(10) Valerie Dreier										
Trustee	4	✓		✓						
(11) Kevin Haynes										
Trustee	4	✓		✓					, ,	
(12) Emilio Ramírez										
President	40			✓	✓	✓		121,820		
(13) Bridget Henderson										
Financial Secretary	20			✓	1			1,800		
(14) John Welch										
Vice President	10	l		✓	√			•		

Par	VII Section A. Officers, Directors, Trus	tees, Key E	mplo	yees			lighe	st C	ompensated E	mployees	(contin	ued)
	(A) Name and title	(B) Average hours per	er officer and a director/trus						(D) Reportable compensation	(E) Reportable compensation from	n from	(F) Estimated amount of
		week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizati (W-2/1099-I	ons	other compensation from the organization and related organizations
(15) M	ichelle Pelz											"- <u></u>
	ding Secretary	10			✓	V		-				
(16)		ļ										
(17)												
(18)								_				
(19)												
(20)												
(21)												
(22)											_	
(23)												•
(24)						-						
(25)												<u> </u>
1b	Sub-total . Total from continuation sheets to Part	VII. Section	 n A	•	•		•	•	123,620			
d	Total (add lines 1b and 1c)						<u>.</u>		123,620			
2	Total number of individuals (including but reportable compensation from the organi		to th	ose	list	ed a	above) wl	ho received mo	ore than \$1	00,000	of
3	Did the organization list any former of employee on line 1a? If "Yes," complete 8							mp	loyee, or high	est compe	nsated	Yes No
4	For any individual listed on line 1a, is the organization and related organizations undividual) 2 2 3 3 3
5	Did any person listed on line 1a receive of for services rendered to the organization?									ation or inc	lividua 	
Section	on B. Independent Contractors											
1	Complete this table for your five highest of compensation from the organization. Repyear.											anization's tax
	(A) Name and business add	ress							(B) Description of se	ervices		(C) Compensation
N/A						_						
	Total number of independent contracto	rs (includin	ıg bu	t no	ot li	imite	ed to	th	ose listed abo	ove) who		
-	received more than \$100,000 of compens	ation from t	he or	ganı	zati	on I	>					

Par	t VIII	Statement of Reve Check if Schedule C		nonco or note t	o any lino in thu	Dart VIII		
		Office it is a contract of the	Contains a res	porise of note :	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Federated campaigns Membership dues . Fundraising events . Related organizations Government grants (con All other contributions, g and similar amounts not inc Noncash contributions includ Total. Add lines 1a-1	1b 1c 1c 1d 1tributions) 1e 1fts, grants, cluded above 1f ded in lines 1a-1f: \$	-0- -0- -0- -0- -0- -0-	-0-			
Program Service Revenue	2a b c d e f	Union Dues Per Capital Tax Refund All other program ser	vice revenue .	900099 900099	392,488 2,776	2,776		
	3 4 5	Total. Add lines 2a–2 Investment income and other similar amo Income from investmen Royalties	(including dividents)	•	395,264 180 -0- -0-	-O-	-0-	-0 -0
	6a b c d 7a	Gross rents Less: rental expenses Rental income or (loss) Net rental income or Gross amount from sales of assets other than inventory	-0- -0- -0-	-0- -0- -0- (ii) Other		The second secon	-0-	-0
	c d	Less: cost or other basis and sales expenses Gain or (loss) Net gain or (loss) .	-0- -0-	-0- -0-	-0-	-0-	-0-	-0
Other Revenue	8a	Gross income from fuevents (not including \$ of contributions reporte See Part IV, line 18		-0-				
Oth	b c 9a b	Less: direct expenses Net income or (loss) f Gross income from ga See Part IV, line 19 Less: direct expenses	rom fundraising aming activities.	-0- events . ► -0-	-0-		-0-	-0
	0 10a b	Net income or (loss) f Gross sales of in returns and allowance Less: cost of goods s Net income or (loss) fi	iventory, less es a old b	-0- -0-	-0-	-0-	-0-	-0
	11a b	Miscellaneous R		Business Code	-0-	-O-	-0-	-0
	d e 12	All other revenue . Total. Add lines 11a- Total revenue. See in			-0- 395 444			

Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must co	mplete all columns	All other organizatio	ns must complete co	olumn (A).
	Check if Schedule O contains a respon	nse or note to any l	ine in this Part IX		· · · '. · · 🗆
	ot include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations			5 A. Z. W. J.	
_	and domestic governments. See Part IV, line 21	-0-			
2	Grants and other assistance to domestic individuals. See Part IV, line 22	-0-			
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	-0-			
4	Benefits paid to or for members	-0-			
5	Compensation of current officers, directors,				
	trustees, and key employees	123,620			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				
b	Legal	1,468			
c d	Accounting				
u e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees		75 275 286 286 286 286 286 286 286 286 286 286	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
g	Other. (If line 11g amount exceeds 10% of line 25, column			-	
	(A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion				
13	Office expenses	10,660			
14	Information technology	91			
15 16	Royalties	8,986	-		
17	Travel	2,540			
18	Payments of travel or entertainment expenses	2,340			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	1,486		,	
20	Interest				
21	Payments to affiliates	166,633			
22	Depreciation, depletion, and amortization .				
23	Insurance				
24	above (List miscellaneous expenses in line 24e. If			Shear of the State of	
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	Donation/Charity	2,500			<u> </u>
b	•				·
C		ļ			· · · · · · · · · · · · · · · · · · ·
d	All other expenses			1	
9 25	All other expenses Total functional expenses. Add lines 1 through 24e	320,099			
25 26	Joint costs. Complete this line only if the	320,039			
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)	-0-	<u> </u>		

Form **990** (2016)

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (B) Beginning of year End of year 1 -0--0-2 Savings and temporary cash investments 298,205 373,550 3 3 -0--0--0--0-Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. -0-Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 -0--0-Assets 7 Notes and loans receivable, net -0--0-Inventories for sale or use 8 190 190 9 Prepaid expenses and deferred charges . -0-10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a **b** Less: accumulated depreciation 10b 10c 12,000 12,000 11 -0-11 Investments—publicly traded securities -0-12 Investments—other securities. See Part IV, line 11 12 -0--0--0-13 13 Investments—program-related. See Part IV, line 11 -0-14 14 -0--0-Other assets. See Part IV, line 11 15 -0-15 -0-16 16 Total assets. Add lines 1 through 15 (must equal line 34) 310.395 385.740 17 Accounts payable and accrued expenses 17 -0--0--0-18 18 -0-19 19 -0--0-20 20 -0-<u>-0-</u> 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 -0--0-Loans and other payables to current and former officers, directors, 22 Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 -0 -0-23 Secured mortgages and notes payable to unrelated third parties . . . -0-23 -0-24 Unsecured notes and loans payable to unrelated third parties . . . 24 -0--0-Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 25 -0--0-Total liabilities. Add lines 17 through 25 . . . -0--0-Organizations that follow SFAS 117 (ASC 958), check here ▶ or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 27 28 28 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. Net Assets 30 30 298.025 373,550 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 31 12,190 12,190 Retained earnings, endowment, accumulated income, or other funds . 32 -0-32 -0-33 33 310,395 385,740 Total liabilities and net assets/fund balances 310,395 385,740

Par	t XI Reconciliation of Net Assets				
	Check of Schedule O contains a response or note to any line in this Part XI		.,	[]
1	Total revenue (must equal Part VIII, column (A), line 12)	1	,	395,44	14
2	Total expenses (must equal Part IX, column (A), line 25)	2		320,09	}9
3	Revenue less expenses. Subtract line 2 from line 1	3		75,34	15
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		310,39	<u>}5</u>
5	Net unrealized gains (losses) on investments	5		-(0-
6	Donated services and use of facilities	6		-(0-
7	Investment expenses	7		-(<u>0-</u>
8	Prior period adjustments	8		-(<u>0-</u>
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-(<u>0-</u>
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		385,74	10
Part	XII Financial Statements and Reporting			-	_
	Check if Schedule O contains a response or note to any line in this Part XII			<u> </u>	_
1	Accounting method used to prepare the Form 990: ✓ Cash ☐ Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	plain		es No	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were com reviewed on a separate basis, consolidated basis, or both:			✓	
b	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audite separate basis, consolidated basis, or both:	 ed on	. 2b	/	
С	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or of the audit, review, or compilation of its financial statements and selection of an independent account	ıntant'	ht 2c		
	If the organization changed either its oversight process or selection process during the tax year, exschedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?		· 3a	1	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	ergo th udits.	ne 3b		
			Form 9	90 (201	6)

Form 990 (2016)

SCHEDULE D . (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2016

Open to Public Inspection

Employer identification number

Interna	tional Union UAW Local 5242; DBA: Local Union 5242	90-0182166						
Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.								
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 6.						
		(a) Donor advised funds	(b) Funds and other accounts					
1	Total number at end of year							
2	Aggregate value of contributions to (during year)							
3	Aggregate value of grants from (during year) .							
4	Aggregate value at end of year							
5	Did the organization inform all donors and donor							
	funds are the organization's property, subject to the	e organization's exclusive legal contro	ol? Yes . No					
6	Did the organization inform all grantees, donors, a							
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose							
	conferring impermissible private benefit?	<u> </u>	· · · · · · · · · · Yes 🗌 No					
Par								
	Complete if the organization answered							
1	Purpose(s) of conservation easements held by the							
	Preservation of land for public use (e.g., recrea							
	☐ Protection of natural habitat	Preservation o	f a certified historic structure					
	☐ Preservation of open space							
2	Complete lines 2a through 2d if the organization he	eld a qualified conservation contribution						
	easement on the last day of the tax year.		Held at the End of the Tax Year					
а	Total number of conservation easements		2a					
b	Total acreage restricted by conservation easement	ts	2b					
C	Number of conservation easements on a certified h							
d	Number of conservation easements included in	(c) acquired after 8/17/06, and not	on a					
	ŭ		· · 2d					
3	Number of conservation easements modified, trans	sferred, released, extinguished, or terr	minated by the organization during the					
	tax year -							
4	Number of states where property subject to conse							
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of							
_	violations, and enforcement of the conservation ea							
6	Staff and volunteer hours devoted to monitoring, inspect	ting, handling of violations, and enforcing of	conservation easements during the year					
_	Assessment of consequences and the constant of the consequences of							
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the							
Ω	►\$							
O	and section 170(h)(4)(B)(ii)?	2(d) above satisfy the requirements of						
9	In Part XIII, describe how the organization reports of		- -					
3	balance sheet, and include, if applicable, the text of							
	organization's accounting for conservation easeme		dicial statements that describes the					
Part			Other Similar Assets					
	Complete if the organization answered '		Juici Juilla Addets.					
1a	If the organization elected, as permitted under SF		revenue statement and balance sheet					
	works of art, historical treasures, or other similar	assets held for public exhibition, eq	lucation, or research in furtherance of					
	public service, provide, in Part XIII, the text of the form	ootnote to its financial statements that	t describes these items.					
b								
	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of							
	public service, provide the following amounts relating to these items:							
	(i) Revenue included on Form 990, Part VIII, line 1		<i>,</i> . > \$					
	(ii) Assets included in Form 990, Part X		> \$					
2	If the organization received or held works of art,	historical treasures, or other similar	assets for financial gain, provide the					
	following amounts required to be reported under S	FAS 116 (ASC 958) relating to these it	ems:					
а	Revenue included on Form 990, Part VIII, line 1 .		> \$					
b	Assets included in Form 990, Part X		> \$					

Schedule D	(Form 990)	2016

Page 2

	UII Organizations Maintaining									
3	Using the organization's acquisition, collection items (check all that apply):		ther reco	ords, che	eck any of the	he follo	wing that are a	signific	ant use	e of its
а	☐ Public exhibition		d	☐ Loa	n or exchan	ge prog	rams			
b	☐ Scholarly research		е							
С	Preservation for future generations	3								
4	Provide a description of the organiza		and exp	lain how	they further	r the org	ganization's ex	empt pu	irpose	in Part
_	XIII.									
5	During the year, did the organization assets to be sold to raise funds rather	than to be mainta							Yes_	□ No
Par	IV Escrow and Custodial Arra									
	Complete if the organization 990, Part X, line 21.								on Fo	rm
1a	Is the organization an agent, trustee included on Form 990, Part X?									
L	If "Yes," explain the arrangement in P							· Ц	Yes	No
b	ii res, explain the arrangement in P	art XIII and compl	ete the i	ollowing	table:			Amount		
•	Paginning balance					10		711100110		
C	Beginning balance					10				
d	Additions during the year									
e	Distributions during the year					16 11				
f	Ending balance								7	 _
2a	Did the organization include an amoun							-		NO
	If "Yes," explain the arrangement in P	art XIII. Check her	e if the e	explanati	on has beer	provide	ed on Part XIII		<u>· </u>	
Par			,	000	D- + B/ P-	- 40				
	Complete if the organization									
		(a) Current year	(b) Pi	nor year	(c) Two year	rs back	(d) Three years ba	ick (e) F	our year	s back
1a	Beginning of year balance									
b	Contributions				<u> </u>					
С	Net investment earnings, gains, and		}		1	}				
	losses									
d	Grants or scholarships									
е	Other expenditures for facilities and		_							
	programs				1					
f	Administrative expenses				 					
g	End of year balance				 			_		
2	Provide the estimated percentage of t	he current year en	l	ce (line 1	a column (all bold (
a	Board designated or quasi-endowmer	-	%	00 (111) 00	g, colainii (c	<i>1))</i> 11010 1	43.			
b	Permanent endowment ▶	%	'0							
C	Temporarily restricted endowment ▶	⁷⁰								
C	The percentages on lines 2a, 2b, and		000/							
За	Are there endowment funds not in the	•		ization th	nat are hold	and ad	ministered for	tha		
Ja	organization by:	possession or the	ie Organi	ization ti	iat are rielu	and ad	illilistered to	u ie	Yes	No
	·							200		NO
	(i) unrelated organizations					• •		. 3a		+
	(ii) related organizations							. 3a(
b	If "Yes" on line 3a(ii), are the related of					•		. <u> 3t</u>)	
4	Describe in Part XIII the intended uses		on's ena	owment	tunas.					
Part					D		o =			40
	Complete if the organization									
	Description of property	(a) Cost or ot		1 ' '	or other basis		Accumulated	(d) E	Book valu	1e
		(investm	—————	 	other)	L	epreciation			
1a	Land	·				. 484				
b	Buildings					 				
С	Leasehold improvements			 		ļ				
d	Equipment	·		ļ	12,000	ļ				12,000
е	Other	·		<u></u>		<u> </u>				
Total.	Add lines 1a through 1e. (Column (d) n	nust equal Form 9	90, Part	X, colum	n (B), line 10	Oc.)	<u>.</u> ▶			12,000

Part VII	Investments—Other Securities		000 Port IV li	no 11h Coo Form	000 Port V line 12
	Complete if the organization ans				thod of valuation
	(a) Description of security or category (including name of security)		(b) Book value		-of-year market value
(1) Financia					···
	neld equity interests			<u> </u>	
(3) Other					
(A)					
(B)				 	
(C)				 	
(D)				 	
(E)				 	
(F) (G)					
(H)				 	
	b) must equal Form 990, Part X, col. (B) line 12.)		·		
Part VIII	Investments—Program Related			Mary Comment	3045-34 ****
T art VIII	Complete if the organization ans		m 990. Part IV. lii	ne 11c. See Form	990. Part X. line 13.
	(a) Description of investment		(b) Book value	(c) Me	thod of valuation
				Cost or end	-of-year market value
(1)					
(2)					
(3)		<u> </u>			
(4)					
(5)					
(6)					
_(7)					
(8)				 	
(9)	21 15 000 B-4V 1/D) (40) b-				
	b) must equal Form 990, Part X, col. (B) line 13.) Other Assets.				
Part IX	Complete if the organization answ	vered "Vee" on For	m 000 Part IV liv	o 11d Soc Form	000 Part V line 15
		Description	in 950, Fait IV, III	le TTu. See FUITI	(b) Book value
(1)		,			(4) 200 (100
(2)					
(3)				,	
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	mn (b) must equal Form 990, Part X, co	ol. (B) line 15.)	· · · · · · ·	<u></u> ▶	
Part X	Other Liabilities.				
	Complete if the organization answ	wered "Yes" on For	m 990, Part IV, lir	ne 11e or 11f. See	e Form 990, Part X,
1.	line 25. (a) Description of liability	(b) Book value			7*
(1) Federal ır		(b) Book value			
(2)	Somo taxos				
(3)	·				
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column (t	o) must equal Form 990, Part X, col. (B) line 25.) ▶				
2. Liability for	uncertain tax positions. In Part XIII, provide	de the text of the footno	te to the organizatio	n's financial stateme	nts that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Par	Reconciliation of Revenue per Audited Financial State Complete if the organization answered "Yes" on Form 99		
1	Total revenue, gains, and other support per audited financial statemen		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1113	
a	Net unrealized gains (losses) on investments	. 2a	
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
e	Add lines 2a through 2d		<u>2e</u>
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)	. 4b	
_C	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, I		
Part	Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 99	-	•
1			
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	, .	
a	Donated services and use of facilities	. 2a	
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII.)		
e	Add lines 2a through 2d		
3	Subtract line 2e from line 1		2e 3
4		· · · · · · ·	• • • •
=	Amounts included on Form 990, Part IX, line 25, but not on line 1:	4.	
a	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)		
С 5	Add lines 4a and 4b		
	XIII Supplemental Information.	, iiile 10.)	5
?; Pan	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this p	eart to provide any ac	dditional information.
· 			
			
			

SCHEDULE O . (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

2016

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Employer identification number

International Union UAW Local 5242; DBA: Local Union 5242 T.A.A.P., UAW	90-182166					
Part VI: Line 4 - There were changes to the Local's bylaws.						
Part VI: Line 6 - Anyone who has applied for and been accepted for membership is a regular member.						
Part VI: Line 7b - All decisions are subject to membership approval.						
Part VI: Line 11b - There is no process used by the organization to review this form before filing.						
Part VI: Line 12c - All officers are covered under the policy. Local unions may determine if conflicts ex	ist by constitutionally required trustee					
audits and the review of monthly financial reports. The parent organization also conducts periodic audits	dits. Restrictions imposed are					
described in the International Constitution.						
Part VI: Line 19 - Copies are provided upon request - Inspection offered during regular business hours	······					
Part X: Line 10C - UAW local Unions only show their physical assets as cost price and do not all for de	preciation.					
·						
	······································					
	····					
<u></u>						
·						